IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant	:	ZEGELIN, Chris		
Serial No.	:	10/705,277	Examiner	: Dagosta, Stephen M.
Filed	:	November 10, 2003	Group Art Unit	: 2683
For	:	IMPROVED WLAN ROAMING BASED ON LOCATION		

AMENDMENT AND RESPONSE

I hereby certify that this paper is being deposited
with the United States Postal Service as first class mail in
an envelope addressed to: Commissioner for Patents, P.O.
Box 1450, Alexandria, VA 22313-1450

December 15, 2005
<u>Date of Deposit</u>

Robert L. Maier
<u>Attorney Name</u>

54,291
<u>PTO Registration No</u>

<u>Signature</u>

December 15, 2005
<u>Date of Signature</u>

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Applicant submits the following remarks and amendments in response to the Office

Action dated September 15, 2005. A complete listing of the claims begins on page 2 of this

paper. Remarks begin at page 6.

-1-

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2003

Application or Docket Number

10705277

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	9	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	9 minus 20=	*
INDEPENDENT CLAIMS	4 minus 3 =	* 1
MULTIPLE DEPENDENT CLAIM PRESENT		☐

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY TYPE ☐ OR OTHER THAN SMALL ENTITY

RATE	FEE		RATE	FEE
BASIC FEE	385.00	OR	BASIC FEE	770.00
X$ 9=		OR	X$18=	—
X43=		OR	X86=	86
+145=		OR	+290=	—
TOTAL		OR	TOTAL	856

CLAIMS AS AMENDED - PART II

12-20-05

AMENDMENT A

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	* 9	Minus	** 20	= —
Independent	* 6	Minus	*** 4	= 2
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐

SMALL ENTITY OR OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 9=		OR	X$18=	/
X43=		OR	X86=	400°°
+145=		OR	+290=	—
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	0 0

AMENDMENT B

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 9=		OR	X$18=	
X43=		OR	X86=	
+145=		OR	+290=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT C

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 9=		OR	X$18=	
X43=		OR	X86=	
+145=		OR	+290=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20.".
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.